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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS			Use separate schedule(s) for each category of the Detailed Summary Page			FOR LINE (check on	NUMBER ly one) 17 20a	PAGE ☐ 18 ☐ 20b	1482 /	1497 19t 21
commercial purposes	ed from such Reports a , other than using the r	nd Statement name and add	ts may no	ot be sold or used any political comm	by any per ittee to sol	son for the	purpose of	soliciting	contributions	
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Tammy for II	Ilinois					<u>-</u>				
Full Name (Last, The Strategy Gro	First, Middle Initial) oup, Inc.						ate of Dist	oursement		
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Full Name (Last, Tollview LLC	First, Middle Initial)						Date of Dis	bursement		
Mailing Address	1566 W Algonquin Rd					-[03	03_	2016	
City Hoffman Estates		St IL	ate	Zip Code 60192-1575	_	#	Amount of I	Each Rece	ipt this Perio	
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SUBTOTAL of Dish	ursements This Page	(optional)							170	015.00
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